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FEC

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FORM 1	ONGANIZATION	1 SOLUMON - 1 BUIS: 17
		FEC MALIONICE LIST ONLY
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Diri Tieiririyi	Joinieis, 12,0,1,2,	
		
ADDRESS (number and street	en) 15,2,0,0, N.W. 4,3, Streeti	
(Check if address is changed)	15. w.i. t.e. 11.0,2, #1.8,8, , , ,	
	Gainesviille	[FIL] 131216106-14141816
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADI	DRESS (Please provide only one e-mail address)	
(Check if address is changed)		
COMMITTEE'S WEB PAGE	ADDRESS (URL)	
(Check if address is changed)	L. L	
	s	<u> </u>
2. DATE	03/2011	
3. FEC IDENTIFICATION	N NUMBER	
4. IS THIS STATEMENT	N NEW (N) OR AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of my knowledge and belief	f it is true, correct and complete.
Type or Print Name of Trea	surer Sulvia Jones	
Type of the teams of the	C/ Con	
Signature of Treasurer	J. S.	Date III 03 2011
NOTE: Submission of false, e	erroneous, or incomplete information may subject the person signing	
Office Use Only	For further information Federal Election Commit Toll Free 800-424-9530 Local 202-694-1100	PEC. PLIBAL I